

Approved For Release 2000/04/12 : CIA-RDP64-00360R000400110008-8
PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL

D. O. Vou. No. _____
Bu. Vou. No. 405

U. S. _____ COST REIMBURSABLE
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

THE UNITED STATES, Dr., Payee's Account No. _____

To _____
(Payee)

PAID BY
SAPC 9423
COPY, OE 2

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Costs				18,430.	98 ✓

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Use continuation sheet(s) if necessary

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total \$ 18,430.98 ✓

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

Differences _____

Amount verified; correct for

(Signature or initials) *JMS*

18,430.98

Contract No. _____ Date _____ Req. No. _____ Date _____ Invoice Rec'd. _____

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ _____

SIGN
ORIGINAL
ONLY

† _____

Title _____

Date _____

(Approving Officer)

Title _____

STATOTHR

STATOTHR THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ dated _____, 19____, for \$ _____ { on Treasurer of the United States in
Cash, \$ _____, on _____, 19____ Payee _____ favor of payee named above.
(Sign original only)

Title _____

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